



ASC Utilization Report

State Form 49933 (R3/6-05)

Indiana State Department of Health

Acute Care

I. Center Identification

Organization Name: SOUTH BEND CLINIC & SURGICENTER

Street Address: 211 N. Eddy St

City: South Bend

County: St. Joseph

ASC Web Address: www.southbendclinic.com

Fiscal Year: 2012

Accredited: ☐ Yes ☒ No

Name of Accrediting Body:

Deemed Status: ☐ Yes ☒ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

II. Identification of Surgical Resources

Number of operating rooms	5
Number of procedure rooms	3

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6481	8566
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45380	1353	
43239	935	
45385	794	
45378	670	
69436	338	
66984	307	
62311	202	

45381	171
64483	159
42820	135

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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